



FOR IMMEDIATE RELEASE

**Egyptian Regional Human Rights Authority
Report of Findings
13-110-9018 and 13-110-9019
Chester Mental Health Center**

The Egyptian Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigations concerning Chester Mental Health Center, a state-operated mental health facility located in Chester. The facility provides services for approximately 240 recipients serving both forensics and civil commitments. The specific allegations are as follows:

In case 13-110-9018:

Privacy rights have been violated due to a camera strategically placed in bathroom hallways.

In case 13-110-9019:

A facility doctor has neglected a recipient's needs upon learning of the recipient's criminal history.

If substantiated, the allegations would be violations of the Centers for Medicare and Medicaid Conditions of Participation for Hospitals (42 C.F.R. 482) and the Mental Health and Developmental Disabilities Code (405 ILCS 5/2).

Statutes

The Special Provisions Applying to Psychiatric Hospitals Section of the CMS Conditions states that the hospital must meet conditions specified in Sections 482.1 through 482.23 (42 C.F.R. 482.60). Under Section 482.13, c, 1, "The patient has the right to personal privacy."

The Mental Health and Developmental Disabilities Code(MHC) (405 ILCS 5/2-100) states "(a) No recipient of services shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of the receipt of such services.
(b) A person with a known or suspected mental illness or developmental disability shall not be denied mental health or developmental services because of age, sex, race, religious belief, ethnic origin, marital status, physical or mental disability or criminal record unrelated to present dangerousness."

The (MHC) (405 ILCS 5/2-102) also states that "(a) A recipient of services shall be provided with adequate and humane care and services in the least restrictive environment, pursuant to an individual services plan. The Plan shall be formulated and periodically reviewed with the participation of the recipient to the extent feasible and the recipient's guardian, the recipient's substitute decision maker, if any, or any other individual designated in writing by the recipient. The facility shall advise the recipient of his or her right to designate a family member or other individual to participate in the formulation and review of the treatment plan. In determining whether care and services are being provided in the least restrictive environment, the facility shall consider the views of the recipient, if any, concerning the treatment being provided. The recipient's preferences regarding emergency interventions under subsection (d) of Section 2-200 shall be noted in the recipient's treatment plan."

Investigation Information for 13-110-9018:

Allegation 1: Privacy rights have been violated due to a camera strategically placed in bathroom hallways.

To investigate the allegation, the HRA Investigation Team (Team), consisting of two members and the HRA Coordinator, conducted a site visit at the facility and toured a showering area. During the visit, the Team spoke with the Recipients whose rights were alleged to have been violated and the Chairman of the facility's Human Rights Committee (Chairman). Facility Policies relevant to the complaints were also reviewed.

I...Interviews:

A. Recipient 1: According to recipient there is no space for clothing in the shower area. Cameras are placed for staff use and not patients. Recipients must place a change of clothing outside the shower room door and in the unit hallway where cameras are located. Thus, a recipient is unclothed and in view of the unit camera when changing or when reaching for a change of clothing.

II...Facility Tour:

According to a facility tour conducted on 4/1/13, cameras are stationary and located in the showering hallways. They do not rotate, they are recorded in live time and are only viewed when there is a reason for it such as incidents occurring that necessitate a review of previous video footage. There are cameras in most public places of the Chester facility except where the nursing desks are located or in rooms and other areas that are considered private. The showering quarters are concrete rooms that have a door. The cameras are placed outside the doors in the hallways. Recipients change in a small area and the showering quarters are placed right behind the changing areas.

The HRA noted that there are no cameras in the restraint rooms but there are cameras in the seclusion rooms.

III...Facility Policies:

The facility's policy/procedure entitled, "Use and monitoring of video equipment" was reviewed. According to the Policy Statement, the use of video monitoring equipment will enhance the safety and security of patients and staff. Under procedures, the location of video monitoring equipment will be approved by the facility director. A list of locations will be provided annually and/or whenever new cameras are installed to the president of each union representing direct care staff. The OIG liaison will coordinate the use of the video monitoring equipment as well as coordinate providing copies of video as related to an investigation. Video cameras will not be installed where patients and employees have a reasonable expectation of privacy. This includes, but is not limited to: inside restrooms, inside shower rooms, inside patient bedrooms, locker rooms, changing rooms, treatment rooms. Video cameras will not be installed inside the following spaces as a matter of policy: nursing stations, private offices, employee break rooms; or any areas where patients are not located.

Conclusion for 13-110-9018

Based on tour of the facility and a policy review, there remains insufficient information to concur a privacy rights violation and allegations are therefore not substantiated. The cameras are placed in public areas to ensure the safety of recipients and staff. There are no recommendations at the present. The HRA suggests that the facility evaluate patient privacy in terms of showering facilities and consider providing a place to put a change of clothing inside the shower room. The HRA strongly suggests that the facility consider placing cameras in restraint room to facilitate the safety of both recipients and staff and due to reported complaints about restraint use at the facility.

Investigation Information for 9019

Allegation 1: A facility doctor has neglected a recipient's needs upon learning of the recipient's criminal history.

To investigate the allegation, the HRA Investigation Team (Team), consisting of two members and the HRA Coordinator, conducted a site visit at the facility. During the visit, the Team spoke with the Recipient whose rights were alleged to have been violated and the Chairman of the facility's Human Rights Committee (Chairman). With the recipient's written authorization, copies of information from the recipient's clinical chart were reviewed by the Authority.

I. Interviews:

A. Recipient 1: The Recipient informed the Team that his physician was neglectful and not getting him medications for sinus allergies. The recipient claims the physician does not visit after learning of patients' criminal charges.

II. Clinical Chart Review:

A. Treatment Plan Reviews (TPRs): The 9/18/12 TPR states that the recipient on 9/13/2012 was reported to have been the aggressor in a physical altercation with a peer. Several male peers began making allegations that the recipient had been making unwanted sexual advances towards them. He was subsequently transferred back to Chester Mental Health facility on 9/18/2012.

The 9/18/2012 30-day treatment plan review discloses that the recipient reports to hearing voices in his head from a character named legion. He describes these voices as real. There several other concerns found in that report that include but are not limited to Peptic Ulcer disease, Hyperlipidemia, overweight obesity, psychosis and bowel elimination problems. There was a mention of sinus issue in the Chester file review outline dated 9/18/2012.

Reports from 9/18/2012 also show interactions and recommendations by physicians and nursing staff for the patient's care. Progress reports indicate a new intervention method with continued treatment and the administration of medications.

Reports from 11/05/12 to 12/04/12 show evidence of the recipient participating in his treatment plan reviews. According to this report there were no reported problems, issues or concerns.

Reports for 1/07/2013 indicate that the recipient is being treated with the antipsychotic, Quetiapine XR 800mg. Reports also indicated that the recipient was being treated for his underlying complaints of anxiety/depression and was treated with Lorazepam, 1mg twice a day and 2mg at night as a result. The recipient was diagnosed by the Psychiatrist as not fit to stand trial.

On 3/24/2013 a note was written by the recipient requesting to see a doctor for pain in his neck and migraines. According to response notes from staff, medications were ordered on 3/23/13.

B. Medication Orders: orders as of 9/18/2012 are as follows; Tab Sertraline 200mg in morning for depression; Quetiapine XR 800 mg at night for psychosis; Clonazepam 1mg 3 times a day and 2mg at bedtime for anxiety and probably Post Traumatic Stress Disorder (PTSD).

C...Progress Notes: All progress notes indicate that the patient is being closely monitored by the facility for individual health evaluations and care planning.

III...Facility Policies:

The facility's policy/procedure entitled, "Admission of New Patients" was reviewed. According to the Policy Statement, "Chester Mental Health Center maintains a uniform, clinically appropriate process to admit new patients." A new patient is defined as an individual who has never been a recipient, a recipient who has been transferred to another facility and returned, and a recipient who has been sent to court and returns after the absence of more than 60

days. The Policy mandates that all new admissions be admitted through the Infirmary. According to the outlined procedure in the Policy, a recipient is asked to undress and shower before he is issued new clothing items. After he is dressed, a Security Therapy Aide (STA) will escort him into the examination room where the STA will record the recipient's height, weight, wrist circumference, and clothing measurements and provide the results to the admitting nurse. The admitting nurse will obtain the recipient's vital signs and document if he has any scars, tattoos, injuries and identifying marks. A complete medical history and a list of the recipient's medications will be obtained. The recipient will also be examined for the presence of pediculosis capitis (lice), scabies, and infectious disorders. The following assessments will be conducted: spiritual, educational/vocational, nutritional, psychiatric, accident/fall risk, visual, dental, bowel elimination, and hearing/speech. A facility Medical Doctor (MD) will conduct a physical examination of the recipient before he is transferred from the infirmary to the unit. If the examining MD feels that the recipient should not go to the unit immediately, orders will be written for treatment, and the recipient will be considered for an admission to the infirmary and remain in that area for the treatment. A facility psychiatrist will conduct a psychiatric evaluation within twenty-four hours of the recipient's admission to the facility.

The facility's policy/procedure entitled, "Patient Rights and Organization Ethics" was also reviewed. According to the Policy Statement under prevention of abuse and or neglect, Individuals shall have the right to refuse medication. They shall have the right not to be restrained or secluded except as specified in section 2-108 and 2-109 of the Mental Health and Developmental Disabilities Code (MHC). Individuals shall be treated with electro-convulsive therapy (ECT) only after full compliance with all applicable requirements set forth in section 2-107 and 2-107.1 of the (MHC). Individuals shall not be subject to treatment by unusual, hazardous, or experimental therapies without the individual's informed consent. Such treatment shall follow applicable federal or state statutes and regulations.

Summary for 13-110-9019

According to the complaint, a recipient's request for sinus and allergy medications as well as neck injury complaints has not been addressed and others are allowed privileges that are not afforded to all patients, particularly patients with a criminal background. The facility's charts and patient's medical history show that the patient is very closely monitored with medications, recommendations and ongoing physician interactions to monitor medical conditions and ensure that patient is fit to stand trial.

Conclusion for 13-110-9019

Based on review of the recipient's clinical chart, history and records there is insufficient information to concur a rights violation and allegations of said facility not honoring recipient's medical request are not substantiated. The HRA did find that the facility conducted assessments as a result of the recipient's reported concern. Therefore, the Authority concluded that the recipient's right to humane care and treatment was not violated. No recommendations are issued.